

TELEPHONE (312) 258-5779



(AP)

Response Under 37 CFR 1.116
Expedited Procedure
Examining Group: 2615

SCHIFF HARDIN LLP**PATENT DEPARTMENT**

6600 SEARS TOWER

233 SOUTH WACKER DRIVE

CHICAGO, ILLINOIS 60606

ATTY. DOCKET: P03,0228

In re application of: Torsten Niederdränk

Serial No.: 10/608,589

GROUP ART UNIT: 2615

Filed: June 27, 2003

EXAMINER: Brian Ensey

For: MODULAR HEARING AID DEVICE

CONFIRMATION NO.: 8450

Mail Stop AF

Commissioner for Patents

PO Box 1450

Alexandria, Virginia 22313-1450

SIR:

Transmitted herewith is an amendment in the above-identified application.

 No additional fee is required.

The fee has been calculated as shown below.

AMENDMENT D AFTER FINAL

CLAIMS AS AMENDED							
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	(6) RATE	(7) ADDITIONAL FEE	
TOTAL CLAIMS	* 13	MINUS	**20	-- X	() X 25.00 () X 50.00		
INDEP. CLAIMS	* 6	MINUS	3	3 X	() X 100.00 (x) X 200.00	\$600.00	
Application amended to contain any multiple dependent claims not previously paid for.				(') YES () NO	() \$180.00 () \$360.00 ONE TIME		
				TOTAL ADDITIONAL FEE FOR THIS AMENDMENT		\$600.00	

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20 write "20" in this space.
- Applicants petition the Commissioner of Patents and Trademarks to extend this time for response to the Office Action dated _____ for _____ months so that the period for response is extended to _____. A check in the amount of \$_____ is attached to cover the cost of the extension. Any deficiency or overpayment should be charged or credited to deposit account No. 501519. A duplicate copy of this sheet is enclosed.
- A check in the amount of \$600.00 is attached.
- A check for \$_____ accompanying IDS under 37 CFR 1.97(c) is attached
- A check for \$_____ and Petition for Consideration of IDS under 37 CFR 1.97(d) is attached.
- The Commissioner is hereby authorized to charge any additional fees which may be required, or to credit any overpayment to account No. 501519. A duplicate of this sheet is enclosed.

When phoning re this application, please call (312) 258-5781.

SCHIFF HARDIN LLP (Customer Number: 26574)

Patent Department

BY Mark Bergner (45,877)

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450 on July 17, 2006

Mark Bergner

NAME OF APPLICANT'S ATTORNEY

Mark Bergner

SIGNATURE

July 17, 2006

DATE



Appl. No. 10/608,589
Reply to Final Office Action of April 28, 2006

Response under 37 CFR §1.116 **expedited procedure**. Examining Group: 2615 (MPEP 714.13)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

AMENDMENT D AFTER FINAL

APPLICANT: Torsten Niederdränk DOCKET NO: P03,0228

SERIAL NO.: 10/608,589 ART UNIT: 2615

FILED: June 27, 2003 EXAMINER: Ensey, Brian

CONF. NO.: 8450

TITLE: MODULAR HEARING AID DEVICE

Mail Stop AF

5 Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

Dear Sir:

10 In response to the Final Office Action dated April 28, 2006 ("OA"),

Applicant Responds as follows and respectfully requests reconsideration of the present application..

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

15 **Remarks/Arguments** begin on page 5 of this paper.

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